Tolini **8871** (July 2600)

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

	atment of the Tros.jury nal Revenue Survice					
	ort I General Information					
1	Name of organization					Employer identification number
2	Campaign for John Mic Mailing address (P.O. Box or number,	<u>:hael Trayr</u> , street, and roor	າດຕ ກ or suite ni	<u></u> <u></u> umber)		Applied for
	28 Condova Street. City or town, state, and ZIP code					59-3660592
	St. Augustine, Floric	la 32084				
3	E-mail address of organization JMTLAW@AUG.COM					
4a	Name of custodian of records		4b Custo	xlian's address		
	Bradley K. Davis	}	3 <u>4 E</u>	B <mark>ay View</mark> Dr <u>iv</u>	e	
			St.	Augustine, F	lorida 3208	34
5#	Name of contact person		5b Contact person's address 34 Bay View Drive			
	Bradley K. Davis					
	<u></u>			Augustine, F		
6	Business address of organization (if d	ifterent from mail	ling address	shown above). Nurr	iber, street, and r	oom or suite number
	City or town, state, and ZIP code				*.4	
	City of town, state, and zir code					
Pai	rt II Purpose	•		····	_	
7	Describe the purpose of the organizat	ion				
	<u> John Michael Traynor</u>	<u>is a candi</u>	date fo	<u>r the office</u>	of Circuit	Court
	<u>Judge, Seventh Judici</u>	<u>al Circuit</u>	<u>, Gro</u> up	<u>15, State o</u>	<u>f Florida </u>	
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					<u></u>	
	t III List of All Related Enti					
8a	Name of related entity	8b Relationsh	iip	Bc Address		
	Not appliantle					
	Not applicable					
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Part IV List of All Officers, 9a Name	Directors, and Highl 9b Title	y Compensated Employees (see instructions) 9c Address
John Michael Traynor	Candidate	4214 Wicks Branch Road
		St. Augustine, Florida 32084
Bradley K. Davis	Campaign	34 Bay View Drive
Shiploy H. Fainalath	Treasurer	St. Augustine, Florida 32084 2506 Shore Drive
Shirley W. Faircloth	Deputy Treasurer	St. Augustine, Florida 32086
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Under penalties of perjury, I declare that the organization named in Part I is to be treated as an organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here Signature of authorized official

	 	7-28-00
7		Date

	TRANSACTION REPORT	(D d	
SEND		/ (& W. S. ,	
RECEIVER	PAGES	NOTE	
678 530 6156	1	0κ	